Kentucky Department for Medicaid Services

Pharmacy and Therapeutics Advisory Committee Recommendations

May 26, 2005 Meeting

This chart provides a summary of the recommendations that were made by the Pharmacy and Therapeutics Advisory Committee at the May 26, 2005, meeting. Review of the recommendations by the Secretary of the Cabinet for Health and Family Services and final decisions are pending.

	Description of Recommendation	P & T Vote
#1	 Sedative-Hypnotic Clinical Criteria Ambien ,Sonata, and the benzodiazapines will have a quantity limit of 14 tablets for 14 days. Existing criteria for LTC patients will remain in effect. Lunesta is available by prior authorization until review by Pharmacy and Therapeutics Committee in July 2005. 	Passed 6 - For 0 - Against
#2	 Xopenex Clinical Criteria An electronic step edit will be instituted requiring step therapy with a trial of generic albuterol before approval of Xopenex. Patients currently managed with Xopenex will be allowed to continue their current treatment. 	Passed 6- For 0 - Against
#3	Colony Stimulating Factors Clinical Criteria 1. Reduce the duration of prior authorization from 12 months to 6 months.	Tabled 3- For 3- Against
#4	 Triptan Clinical Criteria The following clinical criteria are recommended when exceeding established quantity limits: Require a trial of 3 prophylactic agents within the previous year. If criteria are met, the prescription can be filled up to twice the established quantity limits 	Passed 6 - For 0 - Against